Notifiable Disease Surveillance Monthly Report

Metro Public Health Department

Date: March 6, 2003



February 2003 Reported Notifiable Diseases at a Glance

2001001	- P	illubic Discuses u		
Disease	February 2003	Cumulative through February 2003	February 2002	Cumulative through February 2002
AIDS * - pages 3 & 4	20	41	10	28
HIV* - pages 3 & 4	19	39	21	55
Sexually Transmitted Diseases - page 3				
Chlamydia	199	404	171	378
Gonorrhea	111	244	100	225
Primary and Secondary Syphilis	1	3	6	14
Other Syphilis	18	32	26	52
Tuberculosis - page 8	4	10	5	5
Communicable Diseases ** - pages 5-7				
Gastrointestinal Diseases ¹	3	7	8	16
Hepatitis A	0	0	1	6
VRE & DRSP ²	0	4	10	22
Neisseria meningitidis Disease	0	0	0	0
Bacteremia and meningitis caused by:				
Haemophilus influenzae	0	1	0	0
Group A streptococcus	1	2	0	1
Listeria monocytogenes	0	0	0	0
Other Bacteria ³	0	1	0	1
Other Communicable Diseases ⁴	0			
Vaccine-preventable Diseases**- pages 5 & 7				
Influenza-like Illness^	610	826	35	52
Other ⁵	0	1	3	5

^{*}Includes both Davidson County residents and non-Davidson County residents

^{**}Presented on this page by event date

[^]Includes cases reported as confirmed and probable

¹ Gastrointestinal diseases = campylobacteriosis, *E-coli* 0157:H7, giardiasis, salmonellosis, and shigellosis

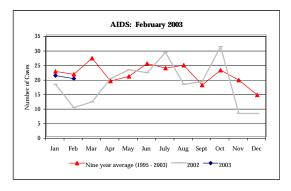
 $^{^2}$ VRE = Vancomycin resistant enterococci / DRSP = drug resistant Streptococcus pneumoniae

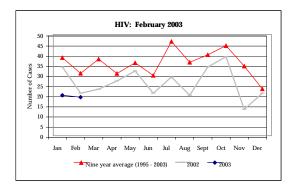
³See page 9 for a list of bacteria included in this category

 $^{^4}$ Includes diseases listed in tables on pages 5 through 7 categorized as "Other"

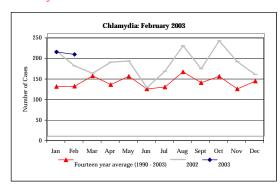
⁵Includes diphtheria, measles, mumps, pertussis, and tetanus

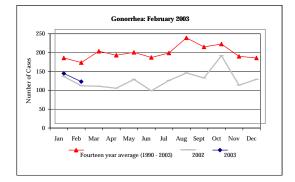
HIV/AIDS

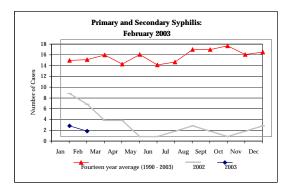




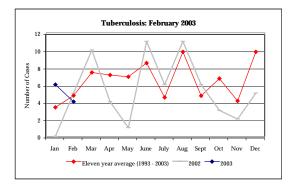
Sexually Transmitted Diseases

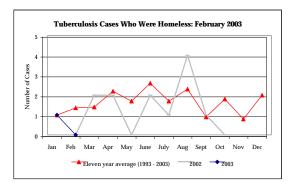




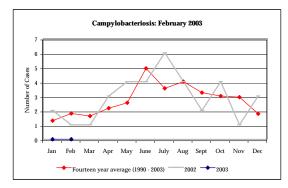


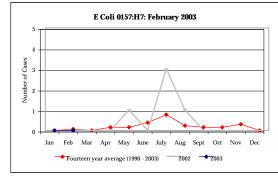
Tuberculosis

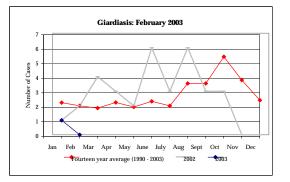


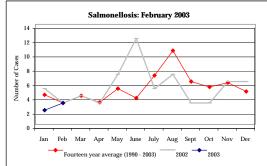


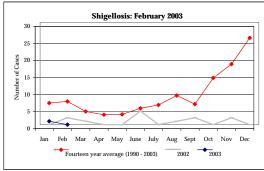
Gastrointestinal Diseases





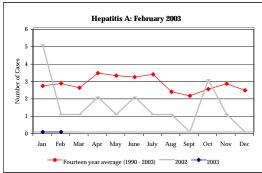






Hepatitis

Number of Cases

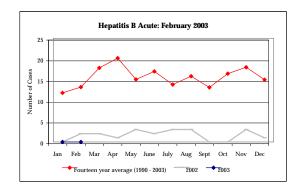


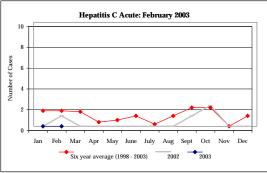
Hepatitis B Perinatal: February 2003

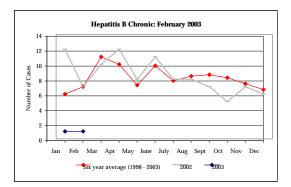
Jan Feb Mar Apr May June July Aug Sept Oct Nov Dec

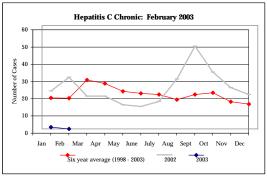
Six year average (1998 - 2003)



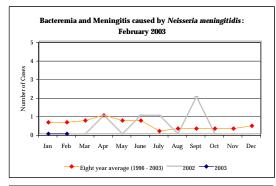


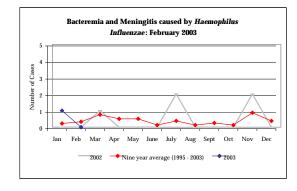


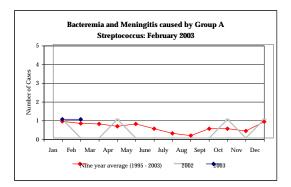


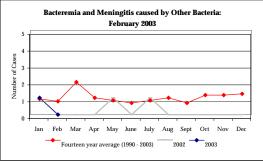


Meningitis

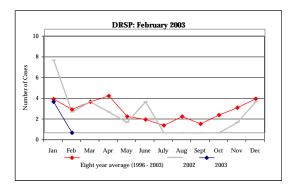


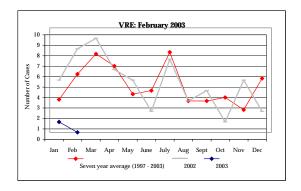






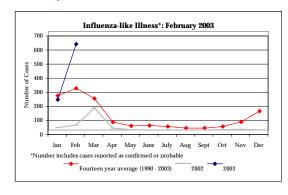
DRSP and VRE

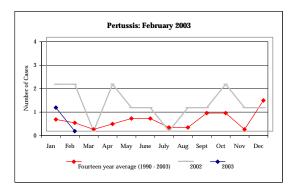




Other Communicable Diseases

Vaccine-preventable Diseases





${\bf Notifiable\ Disease\ Surveillance\ Monthly\ Report:\ AIDS/HIV/STDs}$ Month: February, 2003 by Date of Report

Disease	Reported Cases	Place	of Diagnosis		R	ace			Gender		<u> </u>				A	ge					Previous Year
		MHD	Other	White	Black	Other	Unk	Male	Female	Unk	<1	1-9	10 - 19	20 - 29	30 - 39	40 - 49	50 - 59	60 - 69	70+	Unk	February, 2002
								AIDS/HI	v												
AIDS*	20		20	11	9			12	8					3	8	5	2	2			10
HIV*	19	5	14	6	13			13	6				1	5	4	5	2	2			21
								S	exually T	ansmitte	d Diseases	;									
Chlamydia	199	51	148	62	122	4	11	56	143				73	107	16	3					171
Gonorrhea	111	38	73	25	82	1	3	60	51				25	51	17	13	4	1			100
Syphilis, Primary	0																				3
Syphilis, Secondary	1		1	1					1						1						3
Syphilis, Congenital	0																				
Syphilis, Other	18	6	12	5	13			9	9					5	5	7	1				26
Total Syphilis	19	6	13	6	13	0	0	9	10	0	0	0	0	5	6	7	1	0	0	0	32
Total STDs	329	95	234	93	217	5	14	125	204	0	0	0	98	163	39	23	5	1	0	0	303
Syphilis Cases Who Were Homeless	1	1			1			1								1					1
			•			•		Cum	ılative th	rough F	ebruary,	2003	•		•	•			•		
									A	IDS/HIV	,										
AIDS*	41		41	23	18			30	11					5	13	16	5	2			28
HIV*	39	9	30	21	17	1		31	8				1	9	12	12	3	2			55
			<u>'</u>		L		L	S	exually T	ansmitte	d Diseases	:	•								
Chlamydia	404	96	308	129	251	5	19	101	303				146	204	45	9					378
Gonorrhea	244	101	143	55	181	1	7	131	113				56	108	40	30	8	2			225
Syphilis, Primary	0																				4
Syphilis, Secondary	3	1	2	2	1			2	1						2	1					10
Syphilis, Congenital	0																				
Syphilis, Other	32	8	24	7	25			17	15					10	8	10	3	1			52
Total Syphilis	35	9	26	9	26	0	0	19	16	0	0	0	0	10	10	11	3	1	0	0	66
Total STDs	683	206	477	193	458	6	26	251	432	0	0	0	202	322	95	50	11	3	0	0	669
Syphilis Cases Who Were Homeless Blank space = No report received	1	1			1			1								1					1

Includes both Davidson County and non-Davidson County residents

Notifiable Disease Surveillance Monthly Report: AIDS/HIV Davidson County Resident Only Month: February, 2003 by Date of Report

	_								J,		J										
Disease	Reported Cases	Place of	Diagnosis		Ra	ace			Gender						A	ge					Previous Year
		MHD	Other	White	Black	Other	Unk	Male	Female	Unk	< 1	1-9	10 - 19	20 - 29	30 - 39	40 - 49	50 - 59	60 - 69	70+	Unk	February, 2002
									A	AIDS/HI	V										
AIDS	15		15	7	8			9	6					2	7	3	2	1			8
HIV	14	5	9	3	11			10	4				1	3	3	4	2	1			14
	-							Cumul	ative T	hrough	Februai	y, 2003									•
		_		_					A	AIDS/HI	V										
AIDS	33		33	16	17			24	9					3	11	13	5	1			20
HIV	24	15	9	9	15			18	6				1	3	6	10	3	1			44

Notifiable D	Disease Su	rveil	lance 1	Mon	thly	_							son (epor		ıty R	Resid	ent (Only			Month:
Disease	Reported Cases	Place of	Diagnosis		R	ace			Gender						А	ge					Previous Year
		MHD	Other	White	Black	Other	Unk	Male	Female	Unk	< 1	1-9	10 - 19	20 - 29	30 - 39	40 - 49	50 - 59	60 - 69	70+	Unk	February, 2002
	AIDS/HIV																				
AIDS																2					
HIV	5		5	3	2			3	2					2	1	1		1			7
	-							Cumul	lative T	hrough	Februar	y, 2003	•								
AIDS	8		8	7	1			6	2					2	2	3		1			8
HIV	15	4	11	12	2	1		13	2					6	6	2		1			11

Blank space = No report received

Notifiable Disease Surveillance Monthly Report: Communicable Disease/Vaccine-Preventable Month: February, 2003 by Event Date

Disease	Reported Cases		R	ace			Gender		Ť				A	Age					Previous Year
		White	Black	Other	Unk	Male	Female	Unk	< 1	1-9	10 - 19	20 - 29		40 - 49	50 - 59	60 - 69	70+	Unk	February, 2002
		•				(Gastrointes	stinal Disc	eases										
Campylobacteriosis																			1
E-Coli 0157:H7																			
Giardiasis																			2
Salmonellosis	3	1	1		1	1	2		1	2									3
Shigellosis																			2
Total	3	1	1	0	1	1	2	0	1	2	0	0	0	0	0	0	0	0	8
	•	•				•	Hepatitis	A, B, and	C										
Hepatitis A																			1
Hepatitis B																			
-Acute																			2
-Chronic	1				1	1			1										7
-Perinatal	4			1	3		4					3	1						3
Hepatitis C				1	1			-			1		·		1				
-Acute																			1
-Chronic																			30
Total	5	0	0	1	4	1	4	0	1	0	0	3	1	0	0	0	0	0	44
			1	l	l	Bacter	ial Menin	gitis and I	Bacterem	ia	<u> </u>	1		1		1			
Neisseria meningitidis Disease																			
				l	l						!	1		1		1			
Bacteremia and meningitis caused by:				ı	ı			ı			T	1	1	1	ı				
Haemophilus influenzae																			
Group A Streptococcus	1	1					1						1						
Listeria monocytogenes																			
Other Bacteria																			
Total	1	1	0	0	0	0	1	0	0	0	0	0	1	0	0	0	0	0	0
							DR	SP/VRE											
DRSP																			2
VRE																			8
Total	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	10
							C	Other			1								
Total	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Total of Communicable Diseases	9	2	1	1	5	2	7	0	2	2	0	3	2	0	0	0	0	0	62
1 otal of Communicatie Diseases	9			1	3		ccine-prev			۵.	U	3	۵	U	U	U	U	U	02
Diabelania	1					Va	- prev	citable D	1564363										
Diphtheria Influenza-like Illness	610*		-		610		-	610										610	35**
	910				910			910										010	33
Measles																			
Mumps																			1
Pertussis			-				-									1			2
Tetanus	610		0	0	610		0	610	0	0						0	•	610	90
* Reported as confirmed cases	Blank space = No rep	0	L	0	610	0	0	610	0	U	0	0	0	0	0	U	0	610	38

* Reported as confirmed cases

Blank space = No report received

**33 reported as confirmed cases

Notifiable Disease Surveillance Monthly Report: Communicable Disease/Vaccine-Preventable

Cumulative Through February, 2003 by Event Date

	D . 16			uiati				-											
Disease	Reported Cases	****		ice	** *		Gender				10 10	20.00		Age	×0. ×0				Previous Year
		White	Black	Other	Unk	Male	Female	Unk	< 1	1-9	10 - 19	20 - 29	30 - 39	40 - 49	50 - 59	60 - 69	70+	Unk	February, 2002
			ı	l		(Gastrointes	tinal Dise	ases		ı	ı	ı	1	ı				
Campylobacteriosis																			3
E-Coli 0157:H7																			
Giardiasis	1	1					1						1						3
Salmonellosis	5	1	2		2	1	4		1	3			1						8
Shigellosis	1	1				1							1						2
Total	7	3	2	0	2	2	5	0	1	3	0	0	3	0	0	0	0	0	16
							Hepatitis	A, B, and	C										
Hepatitis A																			6
Hepatitis B																			
-Acute																			2
-Chronic	2			1	1	2			1				1						19
-Perinatal	4			1	3		4					3	1						5
Hepatitis C			1				1			1	1	1	1		1				
-Acute																			1
-Chronic	1		1			1								1					52
Total	7	0	1	2	4	3	4	0	1	0	0	3	2	1	0	0	0	0	85
1000	·		_	_	-		ial Mening											•	
Neisseria meningitidis Disease								,											
resseria inclinigirius Discuse																			
Bacteremia and Meningitis caused by:																			
Haemophilus influenzae	1	1					1										1		
Group A Streptococcus	2	2					2						1				1		1
Listeria monocytogenes																			
Other Bacteria	1	1					1						1						1
Total	4	4	0	0	0	0	4	0	0	0	0	0	2	0	0	0	2	0	2
		•	l			•	DRS	SP/VRE			-	l		1					
DRSP	3	1	1		1	1	2			1							2		9
VRE	1		1				1										1		13
Total	4	1	2	0	1	1	3	0	0	1	0	0	0	0	0	0	3	0	22
		•	I.	1	1	•		ther				1							
Total	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
		<u> </u>	_		_	<u> </u>	_				_	_	_		_				-
Total of Communicable Diseases	22	8	5	2	7	6	16	0	2	4	0	3	7	1	0	0	5	0	125
						Vac	ccine-prev	entable D	iseases										
Diphtheria																			
Influenza-like Illness	826*				826			826										826	52**
Measles																			
Mumps																			1
Pertussis	1	1				1			1										4
Tetanus																			
Total	827	1	0	0	826	1	0	826	1	0	0	0	0	0	0	0	0	826	57
*Poported as confirmed cases	**40 reported as conf		1	ı -			1				L		L -		L -				- -

*Reported as confirmed cases Blank space = No report received **49 reported as confirmed cases

Notifiable Disease Surveillance Monthly Report: Hepatitis Risk Factors

Month: February, 2003 by Event Date Information Not Reported Risk Factor Available* Cases White Black Other Unk Male Female Unk <1 1-9 10-19 20-29 30-39 40-49 50-59 60-69 70+ Unk Hepatitis A During the 2 - 6 weeks prior to illness: Child/employee daycare Household contact to child in daycare Contact to case Sexua Household Othe Foodhandler Consume raw shellfish Part of common-source outbreak Travel South/Central America Africa Caribbean Middle East Asia/South Pacific Australia/New Zealand Other Duration 1 - 3 Days 4 - 7 Days More than 7 Days **Total Reported Cases** Hepatitis B During the 6 weeks - 6 months prior to illness: Contact to case Sexua Househol Other Employed in medical/dental field Receive blood products Associated with dialysis or kidney transplant unit Inject street drugs Sexual Preference Heterosexua Homosexua Bisexua Unknown Number of sex partners On 2 - 5 More than 5 Dental surgery Other surgery Acupuncture Tattoo Accidental needle stick Object contaminated with blood Received 3 dose hepatitis B series Yes No

Information provided only when case answered positively for the respective risk factor.

Total Reported Cases

^{*}When the NETSS field for a specific risk factor is blank (not marked yes or no), that case will be reflected in the count for this column.

Notifiable Disease Surveillance Monthly Report: Hepatitis Risk Factors **Cumulative through February, 2003 by Event Date**

		Cumulat			5 `		-J, -		-J —										
Risk Factor	Reported Cases	Information Not Available*		Ra	ace			Gender						A	ge				
			White	Black	Other	Unk		Female	Unk	< 1	1-9	10 - 19	20 - 29	30 - 39	40 - 49	50 - 59	60 - 69	70+	Unk
					Н	epatitis A	١												
During the 2 - 6 weeks prior to illness:																			
Child/employee daycare																			1
Household contact to child in daycare																			i
Contact to case																			i
Sexual																			i
Household																			i
Other																			ī
Foodhandler																			Ī
Consume raw shellfish																			Ī
Part of common-source outbreak																			Ī
Travel																			
South/Central America																			i
Africa																			i
Caribbean																			
Middle East																		-	
Asia/South Pacific																			I
Australia/New Zealand																			I
Other																			I
Duration																			
1 - 3 Days																			i
4 - 7 Days																			i
More than 7 Days																			i
Total Reported Cases	0	0																	
					Н	epatitis I	В												
During the 6 weeks - 6 months prior to illness:																			
Contact to case																			
Sexual																			i
Household																			i
Other																			ı
Employed in medical/dental field																			
Receive blood products																			i
Associated with dialysis or kidney transplant unit																			
Inject street drugs																			1
Sexual Preference																			
Heterosexual																			
Homosexual																			i
Bisexual																			i
Unknown																			
Number of sex partners																			
None																			I
One																			
2 - 5																			
More than 5																			I
Unknown																			
Dental surgery																			I
Other surgery																			I
Acupuncture																			i
Tattoo																			
Accidental needle stick																			I
Object contaminated with blood																			I
Received 3 dose hepatitis B series																			
Yes																			
No																			I
Total Reported Cases	0	0																	
*When the NETSS field for a specific risk factor is blank (not marked	voc or no) that c	see will be reflected in th	o count for t	hie column															

When the NETSS field for a specific risk factor is blank (not marked yes or no), that case will be reflected in the count for this column. Information provided only when case answered positively for the respective risk factor.

Notifiable Disease Surveillance Monthly Report: Communicable Disease/Vaccine-Preventable Month: February, 2003 by Date of Report

Disease	Reported Cases		R	ace			Gender		Ť			сроге	А	ge					Previous Year
Distast	•	White	Black	Other	Unk	Male	Female	Unk	< 1	1-9	10 - 19	20 - 29	30 - 39	40 - 49	50 - 59	60 - 69	70+	Unk	February, 2002
		•	1	1					stinal Disea		1					1	1		<u> </u>
Campylobacteriosis																			1
E-Coli 0157:H7																			
Giardiasis	1	1					1						1						1
Salmonellosis	3	1			2	1	2		1	2									5
Shigellosis	1	1				1							1						
Total	5	3	0	0	2	2	3	0	1	2	0	0	2	0	0	0	0	0	7
		•						Hepatitis	A, B, and	С					U.				
Hepatitis A																			1
Hepatitis B										II.									
-Acute																			
-Chronic	1			1		1							1						9
-Perinatal																			1
Hepatitis C			*													•	•		
-Acute																			
-Chronic	1		1			1								1					10
Total	2	0	1	1	0	2	0	0	0	0	0	0	1	1	0	0	0	0	21
							Bacte	rial Menin	gitis and Ba	cteremia									
Neisseria meningitidis Disease																			
Bacteremia and meningitis caused by:																			
Haemophilus influenzae	1	1					1										1		
Group A Streptococcus																			
Listeria monocytogenes																			
Other Bacteria	1	1					1						1						1
Total	2	2	0	0	0	0	2	0	0	0	0	0	1	0	0	0	1	0	1
								DR	SP/VRE										
DRSP	1		1			1				1									4
VRE	1		1				1										1		2
Total	2	0	2	0	0	1	1	0	0	1	0	0	0	0	0	0	1	0	6
								C	Other										
Group B Streptococcus Invasive	2	2				1	1		1					1					2
Cryptosporidiosis	1	1				1							1						
Total	3	3	0	0	0	2	1	0	1	0	0	0	1	1	0	0	0	0	2
Total of Communicable Diseases	14	8	3	1	2	7	7	0	2	3	0	0	5	2	0	0	2	0	37
			T				Va	accine-prev	entable Dis	seases									
Diphtheria			1													1	1		
Influenza-like Illness	773*				773			773										773	38**
Measles			1													1	1		
Mumps																			
Pertussis	1	1				1			1										<u> </u>
Tetanus																			<u> </u>
Total	774	1	0	0	773	1	0	773	1	0	0	0	0	0	0	0	0	773	38

^{*} Reported as confirmed cases

Blank space = No report received

^{**36} reported as confirmed cases

Notifiable Disease Surveillance Monthly Report: Communicable Disease/Vaccine-Preventable Cumulative Through February, 2003 by Date of Report

Disease	Reported Cases		R	ace			Gender		uury,		<i>J</i> –			ge					Previous Year
		White	Black	Other	Unk	Male	Female	Unk	<1	1-9	10 - 19	20 - 29	30 - 39	40 - 49	50 - 59	60 - 69	70+	Unk	February, 2002
	_							Gastrointe	stinal Disea	ses									
Campylobacteriosis																			2
E-Coli 0157:H7																			
Giardiasis	1	1					1						1						1
Salmonellosis	4	1	1		2	1	3		1	2			1						5
Shigellosis	1	1				1							1						
Total	6	3	1	0	2	2	4	0	1	2	0	0	3	0	0	0	0	0	8
	-							Hepatiti	s A, B, and (C									
Hepatitis A																			5
Hepatitis B																			
-Acute																			10
-Chronic	1			1		1							1						
-Perinatal																			1
Hepatitis C																			
-Acute																			10
-Chronic	1		1			1								1					
Total	2	0	1	1	0	2	0	0	0	0	0	0	1	1	0	0	0	0	26
							Bacte	erial Menin	gitis and Ba	cteremia									
Neisseria meningitidis Disease																			
Bacteremia and Meningitis caused by:			1																
Haemophilus influenzae	1	1					1										1		
Group A Streptococcus	1	1					1										1		1
Listeria monocytogenes		٠.																	
Other Bacteria	3	1					1			•			1						2
Total	3	3	0	0	0	0	3	0 DP	0 SP/VRE	0	0	0	1	0	0	0	2	0	Z
DRCR	3	1	1		1	1	2	J.	SI/VKE	1	1						2		7
DRSP VRE	1	1	1		1	1	1			1			1				2		5
Total	4	1	2	0	1	1	3	0	0	1	0	0	1	0	0	0	2	0	12
1 otai	4		L	U	1		3		Other	1	U	U	1	U	U	U	2	U	12
Group B Streptococcus Invasive	2	2				1	1		1					1					3
	1	1				1	1		- 1				1						3
Cryptosporidiosis Total	3	3	0	0	0	2	1	0	1	0	0	0	1	1	0	0	0	0	3
10(4)	,	-	U	U	U	-	1	U	- 1	U	U	U	1	1	U	U	U	U	3
Total of Communicable Diseases	18	10	4	1	3	7	11	0	2	3	0	0	7	2	0	0	4	0	51
							V	accine-prev	entable Dis	eases									
Diphtheria																			
Influenza-like Illness	773*				773			773										773	43**
Measles																			
Mumps																			
Pertussis	1	1				1			1										
Tetanus																1			
Total	774	1	0	0	773	1	0	773	1	0	0	0	0	0	0	0	0	773	43

*Reported as confirmed cases Blank space = No report received **41 cases reported as confirmed

Notifiable Disease Surveillance Monthly Report: Tuberculosis

Month: February, 2003 by Date of Report

Site	Reported Cases	Place of 1	Diagnosis		Race/Ethnicity				Gender						A	ge					Comments
		MHD	Other	White Black Non-Hisp Non-His	Amer. Ind/Alask p Hispanic Nat.	. Asian/Pac. Islander	Other	Male	Female	Unk	< 1	1-9	10 - 19	20 - 29	30 - 39	40 - 49	50 - 59	60 - 69	70+	Unk	
New Pulmonary Cases	4	1	3	2 2				4					1	1		1		1			
New Extrapulmonary Cases																					
New Cases in Dual Sites																					
New Homeless Cases	0																				Total New Cases
Total New Cases	4	1	3	2 2				4					1	1		1		1			February 2002: 5
	•			-				Cumulat	ive Through	ı February,	2003	•									•
									Pulmon	ary											
Total Cases	8	2	6	3 4		1		7	1				2	1		2	1	2			
						·		•	Extrapulme	onary		<u> </u>									
Total Cases	2	1	1	1 1				2							1	1					
	•		*	•		'			Dual Si	tes			*				!		!	!	
Total Cases																					
				•	"			•	All Site	es											
Total Cases	10	3	7	4 5		1		9	1				2	1	1	3	1	2			
Total Homeless Cases	1		1	1				1								1					
Total Drug-resistant Cases																					Cumulative Total Thru
Total Multi-drug resistant Cases																					February 2002: 5
Total Cases with HIV Co- infection	1	1		1				1							1						Tebruary 2002. 3
Total Cases Foreign Born < 5 Years	3	- 1	3	1 1		1		3						1	1	1		1			Somalia
Total Cases Foreign Born > 5 Years	1	1	3	1		1		1						1		1		1			Honduras

Blank space = No report received

Definitions and Technical Notes

1. Human Immunodeficiency Virus (HIV) / Acquired Immunodeficiency Syndrome (AIDS): Effective January 1, 2000, the Centers for Disease Control & Prevention (CDC) has established a new case definition for HIV infection in adults and children that includes revised surveillance criteria for HIV infection and incorporates the surveillance criteria for AIDS. For adults and children aged ≥ 18 months, the HIV surveillance case definition includes laboratory and clinical evidence specifically indicative of HIV infection and severe HIV disease. For children aged <18 months (except for those who acquired HIV infection other than by perinatal transmission), the HIV surveillance case definition updates the definition in the 1994 revised classification system. The revised case definition includes HIV nucleic acid (DNA or RNA) detection tests and permits reporting of cases based on the result of any test licensed for diagnosing HIV infection in the U.S. The entire case definition may be found in MMWR, December 10, 1999 / Vol.48 / No. RR-13.

Effective January 1, 1993, the CDC expanded the AIDS surveillance to include all HIV infected adolescents and adults aged greater than or equal to 13 years who have either a) less than 200 CD4+ T-lymphocytes/uL; b) a CD4+ T-lymphocyte percentage of total lymphocytes of less than 14%; or c) any of the following three clinical conditions: pulmonary tuberculosis, recurrent pneumonia, or invasive cervical cancer. The expanded definition retained the 23 clinical conditions in the AIDS surveillance case definition published in 1987.

- 2. <u>Sexually Transmitted Diseases (STDs)</u>: Sexually transmitted diseases are infections one can acquire by having sex (vaginal, oral, and/or rectal) with another who has the infection. Viruses or bacteria can cause STDs. Although there are many types of STDs, only HIV/AIDS, chlamydia, gonorrhea, and syphilis are required to be reported to the health department and are presented in this report. HIV/AIDS cases are tabulated separately from other STDs for programmatic reasons.
- 3. <u>Communicable/Vaccine-preventable Diseases</u>: Communicable diseases in this report are a selected group of notifiable diseases that are reported to the Metropolitan Health Department of Nashville and Davidson County (MHD) regularly (other than AIDS/HIV, STDs, and TB). Other communicable diseases not listed in this report may be added as needed. Communicable diseases make up the largest portion of notifiable diseases, which are diseases that are required by law to be reported to the health department. Diseases that can be prevented by immunization include influenza, measles, mumps, polio, rubella (German measles), pertussis, diphtheria, tetanus, *Haemophilus influenzae* type b, hepatitis B, varicella (chickenpox), and others. Influenza, measles, diphtheria, mumps, pertussis, and tetanus are the six vaccine-preventable diseases listed regularly in this report, although others may be included as needed.
- 4. <u>Tuberculosis</u>: A chronic bacterial infection caused by <u>Mycobacterium tuberculosis</u> (MTB), characterized pathologically by the formation of granulomas. The most common site of infection is the lung, but other organs may be involved. A verified case of TB is a case that has laboratory confirmation of <u>Mycobacterium tuberculosis</u> (i.e., positive culture for MTB) or, in the absence of laboratory confirmation, a case that meets the clinical case definition. A clinical case meets all of the following criteria: 1.) It has a positive tuberculin skin test. 2.) Other signs and symptoms compatible with tuberculosis (e.g., an abnormal, unstable [i.e., worsening or improving] chest radiograph, or clinical evidence of current disease are present. 3.) There is treatment with two or more antituberculosis medications. 4.) A completed diagnostic evaluation. Because verification of a tuberculosis case according to the case definition as described above requires 6 8 weeks or longer, a case may be reported to the Tennessee Department of Health (TDOH) and presented in this report one to two months or longer after evaluation and care was initiated for the case. Following evaluation for tuberculosis, some persons are determined to not have a laboratory confirmation of MTB or to meet the clinical case definition for the disease, and are therefore not reported to the TDOH.

A TB case should not be counted twice within any consecutive 12-month period. However, cases in which the patients had previously had verified disease should be reported again if the patients were discharged from treatment. Cases also should be reported again if patients were lost to supervision for greater than 12 months and disease can be verified again. Mycobacterium diseases other than those caused by M. tuberculosis complex should not be counted in tuberculosis morbidity statistics unless there is concurrent tuberculosis. (Centers for Disease Control & Prevention case definition).

Information pertaining to tuberculosis cases who were homeless is provided beginning in December, 2000. Homeless is defined as:

- (1) An individual who lacks a fixed, regular, and adequate nighttime residence; or
- (2) An individual who has a primary nighttime residence that is:
 - (a) A supervised publicly or privately operated shelter designed to provide temporary living accommodations (including welfare hotels, congregate shelters, and transitional housing for the mentally ill); or
 - (b) An institution that provides a temporary residence for individuals intended to be institutionalized; or
 - © A public or private place not designated for, or ordinarily used as, a regular sleeping accommodation for human beings.

A homeless person may also be defined as a person who has no home, e.g., is not paying rent, does not own a home, and is not steadily living with relatives or friends. Another definition is a person who lacks customary and regular access to a conventional dwelling or residence. Included as homeless are persons who live on streets or in nonresidential buildings. Also included are residents of homeless shelters, shelters for battered women, welfare hotels, and single room occupancy (SRO) hotels which are not designated for permanent long-term housing. The term homeless is applied to any patient who meets the definition of homeless at any time during the 12 months prior to the time when the TB diagnostic evaluation was performed. (Definition from the TIMS User's Guide).

- 5. <u>Surveillance</u>: Continuous analysis, interpretation, and feedback of systematically collected data, generally using methods distinguished by their practicality, uniformity, and rapidity rather than by accuracy or completeness. By observing trends in time, place and persons, changes can be observed or anticipated and appropriate action, including investigative or control measures, can be taken. Sources of data may relate directly to disease or to factors influencing disease. Thus they may include (1) mortality and morbidity reports based on death certificates, hospital records, general practice sentinels, or notifications; (2) laboratory diagnoses; (3) outbreak reports; (4) vaccine utilization-uptake and side effects; (5) sickness absence records; (6) disease determinants such as biological changes in agent, vectors, or reservoirs; (7) susceptibility to disease, as by skin testing or serological surveillance (e.g., serum banks). This definition was taken from "A Dictionary of Epidemiology" third edition, edited by John M. Last, and published in 1995.
- 6. Event Date: Event date is defined as the earliest known date associated with the incidence of the disease. This date may be the date of disease onset, the date of clinical diagnosis, laboratory diagnosis, report to county health department, report to state health department, or as a last resort, any date associated with the case. For purposes of this report, event date is the date of laboratory diagnosis.
- 7. Report Date: Report date is defined as the date that the disease was reported to the Tennessee Department of Health. The report date is always a Saturday. For example, diseases displayed in this report by report date reflect those cases reported to the Tennessee Department of Health from the week ending the second Saturday of the month of the report to the week ending the first Saturday of the current month.

- 8. NETSS: National Electronic Transmitting Surveillance System
- 9. <u>TIMS</u>: Tuberculosis Information Management System
- 10. HARS: HIV/AIDS Reporting System
- 11. Cumulative totals for STD's, communicable diseases and vaccine-preventable diseases represent only the totals in 1999 and 2000 through the respective month being reported on in 1999 and 2000.

12. HIV/AIDS/STD data:

- ♦ Provided by: Dan McEachern, Division of STD Control, and Nancy Horner
- ♦ Date: March 5 and 6, 2003
- ♦ Data Source: STD cases entered into the NETSS database by report date.
- ♦ HIV/AIDS cases entered into the HARS database during the calendar month of the report.
- ♦ Please note: Number of cases of HIV/AIDS may include both Davidson County residents and non-Davidson County residents. Resident vs. non-resident status is indicated page ten. STD data presented is Davidson County resident data only.

13. Communicable/Vaccine-preventable diseases data:

- The data used to prepare the Communicable/Vaccine-preventable Diseases portion of this report were downloaded from NETSS on March 4, 2003 at the Metropolitan Health Department of Nashville and Davidson County by Nancy Horner, Division of Epidemiology.
- ♦ Data presented is Davidson County resident data only.

In June 2000, changes were made in how bacterial meningitis and bacteremia are presented in the report. These changes were made to 1) make the data more easily interpreted and 2) to more closely represent the manner in which the diseases are reported to CDC through NETSS. The NETSS event numbers used to report these bacteria to the CDC include both cases of meningitis and bacteremia caused by the bacteria. In order to determine whether a reported case is meningitis or bacteremia requires entry into the secondary screens of the NETSS system where laboratory specifics are entered, such as 1) specimen from which the organism was isolated (blood, cerebrospinal fluid, pleural fluid, peritoneal fluid, pericardial fluid, joint, placenta, amniotic fluid, and other) and 2) type of infection caused by the organism (primary bacteremia, meningitis, otitis media, pneumonia, cellulitis, epiglottitis, peritonitis, pericarditis, septic abortion, amnionitis, septic arthritis, conjunctivitis, other); and 3) serogroup. This report will provide only the total numbers for the represented categories. For specific information pertaining to numbers of bacterial meningitis vs. bacteremia, contact Pam Trotter at Ext. 632.

The bacteria included in the "Other Bacteria" category include: Group B streptococcus, *Streptococcus pneumoniae*, Escherichia coli, *Staphylococcus aureus*, *Staphylococcus epidermidis*, *Klebsiella* species, Enterobacter species, *Serratia* species, Actinobacter species, Group D streptococcus, and other streptococcus.

14. Tuberculosis data:

- ♦ Data pertaining to numbers of drug-resistant cases provided by Division of Tuberculosis Elimination.
- Date:
- Nancy Horner, Division of Epidemiology, ran the tuberculosis data from the TIMS database on March 6, 2003.
- ◆ Data Source: TIMS. Tuberculosis cases presented in this report reflect surveillance of new cases based on calendar month of report.
- Please note: Cases presented are primarily Davidson County residents, but may include some cases diagnosed, treated, and managed in Davidson County but residing in another county. Those cases not Davidson County residents will be so indicated on the report.

Because determination of drug/multi-drug resistance may require as long as 2 months, beginning with the October 2001 report this information will presented only as cumulative data. Similarly, HIV reports may not be available to accurately reflect by month the HIV status of each case so HIV Co-infection status will presented as cumulative data only.

In September of 2001, maps were added to the report. The maps are geographical representation of individual cases of diseases. The maps are produced using ArcView GIS Version 3.0.

In May of 2002, information pertaining to risk factors for hepatitis A and B were added to the report.